

Prestine Healthcare Group Ltd Nurse Agency

West Calder Business Centre
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Type of inspection:
Announced (short notice)

Completed on:
23 July 2024

Service provided by:
Prestine Healthcare Group Ltd

Service provider number:
SP2022000036

Service no:
CS2022000055

About the service

Prestine Healthcare Group Ltd is a registered nurse agency operating from an office in West Calder. The agency supplies registered nurses and care staff to care homes who are providers of care services. The staff in the office are responsible for recruitment, oversight, and providing on-call services for the staff.

At the time of the inspection, the service was providing regular nurses to two care homes and had provided nurses on an ad hoc basis to three other care homes. Only the nursing element is regulated by the Care Inspectorate.

About the inspection

This was a short notice announced inspection which took place on 20, 21, 24, 25, and 26 June 2024 and 23 July 2024. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included registration information, information submitted by the service, and intelligence gathered about the service.

In making our evaluations of the service we:

- spoke with five care home managers who have used the service
- spoke with seven staff and management
- reviewed documents.

Key messages

- The agency prioritised continuity of nurses.
- The management team were responsive to feedback and were quick to make improvements.
- Safer recruitment practices should be embedded.
- Verification of training and ensuring it is relevant to nurses working in Scotland would improve the service.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	4 - Good
How good is our leadership and staffing?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

4 - Good

We evaluated this key question as good, where a number of strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

People experienced compassion, dignity, and respect. Nurses were matched well to the care homes they worked in, with one care home using regular agency nurses. We heard that "they prioritise providing the same nurses so it allows for continuity of care". This meant that people received care from agency staff that they knew.

Conversations with nurses and feedback from care homes indicated that the quality of care and support was good. One care home was regularly requesting the same nurse as they were confident in their skills and abilities. We heard that "they [the agency and nurses] have been really good" and "the nurses are skilled and work along with the [regular care home] team". This gave us confidence that the nurses provided good care and support.

The service was responsive. The manager was described as "quick to respond" and "accommodating" of requests for nurses. One care home manager described agency nurses being provided at very short notice. This meant that the care home was not left short of staff and people received the care and support that they needed.

The nurses were supported by policies and procedures that enabled them to be confident when working within care homes. Policies were in place to support safe practice, including adult protection, infection prevention and control, and safe medication administration. Although these policies were in place, we observed that they were not all fully implemented and the management team had gaps in their knowledge of the content. We also noted that the policies needed to be more specific to the service. We raised this with the manager and they agreed to review the policies.

Nursing staff were professional and working within their nursing code of conduct. However, the service was not providing training or information about the Health and Social Care Standards which we would expect to see. Practice in accordance with the standards ensures that people who receive care do so in a way that respects and protects their human rights. We encouraged the manager to include the standards with the training and reflection opportunities for staff. We have reflected on training within this report under 'How good is our leadership and staffing?'

How good is our leadership and staffing?

4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

The service had a recruitment policy in place which set out safer recruitment practices. During the inspection, we observed that the recruitment of agency nurses was not undertaken in line with the policy. The management team were not following best practice guidance around seeking references and relying on Protection of Vulnerable Group (PVG) checks from other employers. We offered guidance on how to improve this. The management team took immediate action to address our concerns with PVG checks being completed and seeking new references, prioritising nurses working regular shifts with Prestine. We were confident the manager would embed this good practice. Due to the importance of safer recruitment, we

made an area for improvement and will check on progress at a future inspection (see area for improvement 1).

The service had a culture of learning. They had systems in place to manage accidents, incidents, complaints, compliments, and any protection concerns. There had been very few incidents that were reportable to the Care Inspectorate. The service had good links with the care homes to address incidents and concerns and we shared guidance to ensure that the manager understood when incidents needed to be notified to the Care Inspectorate. This approach was enabling the management team to take action to address and learn from events.

The office team were undertaking quality assurance checks, such as staff professional registration, obtaining feedback from services using the agency nurses, reviewing service delivery, and recording incidents and complaints. Many checks were informal with limited records to demonstrate how they were using findings to drive change and make improvements. They did not have a formalised self improvement plan. We discussed with the management team how they could develop this further and they took immediately action to implement this. We look forward to seeing this progressed at future inspections.

Staff were trained in key areas of their role, such as safe moving and handling, adult support and protection, and safe administration of medication. The management team were undertaking checks of agency nurses' training. Where clinical training needs were identified for nurses, the manager had formed connections and was seeking training from local health boards. However, the service was mainly relying on nurses, employed elsewhere, to be trained by their other employer. Although Prestine were checking training certificates, we observed the training was not always focused on Scottish legislation, such as adult support and protection, and that the management team were not verifying the content of training and were unable to satisfy themselves that it was adequate. We encouraged the management team to check and ensure that they were satisfied with the content and quality of external training (see area for improvement 2).

Areas for improvement

1. To support safer recruitment, the provider should ensure that recruitment of staff has been informed by all aspects of safer recruitment guidance ('Safer Recruitment Through Better Recruitment', Care Inspectorate (2023)).

This should include, but not be limited to, up-to-date background checks, including seeking verifiable references and Protection of Vulnerable Groups checks being undertaken before staff commence employment.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am confident that people who support and care for me have been appropriately and safely recruited' (HSCS 4.24).

2. To promote a well trained staff team, the provider should ensure that nurses are appropriately trained for their role.

This should include, but not be limited to:

a) Verify the content of training provided by external agencies.

b) Where training is not verifiable or to an acceptable standard, make arrangements for nurses to complete required training and refresher courses.

c) Ensure that nurses have undertaken adult support and protection training which is focussed on Scottish legislation.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice, and follow their professional and organisational codes' (HSCS 3.14).

Complaints

There have been no complaints upheld about the service. Details of any upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.1 People's rights are promoted and respected	4 - Good
1.2 People's health and wellbeing benefits from their care and support	4 - Good
How good is our leadership and staffing?	4 - Good
2.1 Safer recruitment principles, vision and values positively inform practice	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good
2.3 Staff have the right skills and are confident and competent	4 - Good

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